

UNITED STATES PATENT & TRADEMARK OFFICE  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND				
1 Date of Request: 9-15-05		2 Serial/Patent # 10/532229		
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
Filing				\$
Amendment				\$
Extension of Time				\$
Notice of Appeal/Appeal				\$
Petition				\$
Issue				\$
Cert of Correction/Terminal Disc.				\$
Maintenance				\$
Assignment				\$
Other				\$
		7 TOTAL AMOUNT OF REFUND	\$ 100.00	
8 TO BE REFUNDED BY:				
10 REASON:		Treasury Check		
Overpayment		Credit Deposit A/C #:		
Duplicate Payment		9 50--2866		
No Fee Due (Explanation):				
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: <u>Barbara Campbell</u> TITLE: _____				
SIGNATURE: <u>BC</u> PHONE: _____				
OFFICE: <u>PCT/DO/EO</u>				
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****				
Repln. Ref: 09/16/2005 BCAMPBEL 0017340300 FC: 9204 \$100.00 CR				
APPROVED: _____ DATE: _____				

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance  
Refund Branch  
Crystal Park One, Room 802B